

EXHIBIT B-1



GOVERNMENT OF PUERTO RICO

RETIREMENT BOARD OF THE GOVERNMENT OF PUERTO RICO

JR-005
REV. APR. 21

RECEIVED
JUL 07 2021
PRIME CLERK

NOTICES

The claimant is hereby advised of the right to request reconsideration or to appeal the present decision, in accordance with the provisions of Article 4-102 and Para. 11(b) of Article 4-103 of Act No. 447 of May 15, 1951, as amended, which are cited below:

“Art. 4-103, Para. 11(b) – Reconsideration

The claimant shall be notified of the Administrator's decision by certified mail and the person or persons thus affected may, within a term of fifteen (15) days from the date of notice, submit a writ of reconsideration of the decision. The Administrator shall consider said petition within twenty (20) days of its filing. If a decision is reached in its reconsideration, the term to appeal shall start counting from the date the Administrator's decision is served, definitively resolving the writ of reconsideration. Should the Administrator deny the petition outright or fail to take any action regarding the writ of reconsideration within twenty (20) days from its filing, the term to appeal shall start from the date of notice of the denial or once the twenty (20) days have elapsed, as the case may be. .”

“Art. 4-102 – Appeal

Appeals shall be made by filing a writ of appeal with the Secretary of the Board within the thirty (30) days following the date on which the initial resolution of the Administrator became final or on which his final decision upon reconsideration was deposited in the mail. Said writ shall set forth the grounds on which the claimant bases the appeal, pointing out the decision or part thereof with which he disagrees, and notice of the appeal shall be served on other parties, if any.”

Instructions:

- The Petition shall be filed within the corresponding time period beginning from the date it is sent.
- Pleadings shall only be accepted on letter-size paper (8 ½ x 11), except documents issued by the State Insurance Fund and Industrial Commission.
- Fill out all of the boxes and mark N/A where not applicable.
- Should you need additional space for your responses, you can use additional sheets.
- Enclose all required documents, in accordance with Program Regulations.
- If you wish to receive service by mail, include a self-addressed stamped envelope.

Retention period: Same as for the file of which it is part.



Avenida Arterial Hostos 235 - Capital Center - Torre Norte piso 8 | PO Box 42003, San Juan, PR 00940-2203

787-777-1500 www.retiro.pr.gov

Eva E. Meléndez Fraguada

evaestella@outlook.com

Appeal Retirement Board of the Government of PR

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On June 23, 2021, I received a second instruction by mail from Prime Clerk, Notice of Administrative Reconciliation, assigning a new Claim Number 177716, claim amount \$99,793.52, without interest, in reference to contributions accumulated through June 30, 2013, Act 1, Public Employee Claims and Pension/Retirement. In said notice, there is an order to the Retirement System Administration, administrative reconciliation (See Exhibit II).

On December 19, 2019, I sent a letter to the Retirement Board of the Government of PR and to Prime Clerk in relation to the provisions of Act 106 of August 26, 2017, safeguarding the wellbeing of Retirees and Public Servants and [the Board's] non-compliance in reference to the provisions of Chapter I, Article 1.4 of this Act - Public Policy, to protect the future of our public servants, ensure that they can have a dignified retirement, FREE of uncertainty, SEGREGATING their personal contributions, guaranteeing same...in separate ACCOUNTS. In my case (Eva Meléndez), Act 1, up to 6/30/13 (Hybrid) and Act 106, 7/1/17 up to the present.

Chapter II of Act 106 counts for the payment of accumulated pension by the Retirement Systems, in Article 2.2, Record of Accumulated Pensions, it sets forth that a record shall be kept of each participant, beneficiary, and Retiree within the Retirement systems, reflecting in detail the amounts that are due to each one as accumulated pension, in accordance with their respective Retirement System, until the date that Act 106 enters into force. [Such record] must detail, without entailing a limitation, the accumulated benefits to which the participant is entitled and the Employment History and Contributions made, in accordance with each retirement law covering the participant, beneficiary, and Retiree of the three Retirement Systems. It sets forth a term of no more than 180 days from the date that Act 106 was passed, August 23, 2017, in which to produce a record of all participants including the accumulated pension for each, by the three retirement systems, as of the time that Act 106 entered into force, as well as the terms of payment for same. The three retirement systems must take all necessary measures to GUARANTEE that the record CONTAINS true and accurate information with respect to [...]

Eva E. Meléndez Fraguada

evaestella@outlook.com

Appeal Retirement Board of the Government of PR

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[...] each participant, beneficiary, or Retiree. Therefore, since the terms set forth were not complied with, I personally requested the certification of Account Statement on November 9, 2017, and I sent a letter in this regard. (See Exhibit III).

On June 12, 2021, I received, with return receipt, by the Retirement System Administration dated May 25, 2021, the decision of the Participant Services Unit of the Retirement Board of the Government of PR in response to the first Order issued by Prime Clerk for Administrative Settlement in relation to my claim (Proof of Claim number 31272) and letter dated December 9, 2020 addressed to Mr. Luis M. Collazo Rodriguez, Retirement Systems Administrator, and to Omar Marrero, Executive Director, Retirement Board of the Government of PR. Title III – Promesa 17BK 3283-LTS (See Exhibit IV).

Therefore, the accumulated contributions, of which I was informed by way of May 25, 2021 letter, received on June 12, 2021, expressing that Article 5-110 of Act 447 of 05/15/51, as amended, provides that the public service separation benefits ARE upon permanent separation from the service. That, being an active employee, I would be entitled to receive the benefits at 65 years of age, I would be able to request pension benefits, three (3) years prior to reaching the required age for Updating Contributions, and it states, if any?.... [sic.]

Moreover, it indicates that when filing for pension, the Participants Unit updates and corrects same (contributions) in the system. However, Act 80 of August 3, 2020, Incentivized Retirement Program, was created, and the Selection Form was sent, indicating that my participation would be final and irrevocable, where they had to present amendment 2021-03, which stated that my status, rights, and current work conditions would not be compromised, nor would there be any legal effect if the implementation of the program is not completed. Same continues to be clarified by the Fiscal Oversight Board, who issued its opinion on June 24, 2021, not supporting, setting forth parameters under which it could be considered for some agencies or Corporation (See Exhibit V).

[illegible signature]

Eva E. Meléndez Fraguada

evaestella@outlook.com

Appeal Retirement Board of the Government of PR

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Moreover, it indicates that I have accumulated \$131,378.79 in contributions and/or 21.25 years calculated as of June 30, 2013, Act I, meaning the \$92,666.79 in contributions and 38,712.00 in interest as of May 25, 2021. This is still without having the opportunity to have an appointment with the Retirement Systems Administration to corroborate the amount included in Exhibit I, which would be missing \$7,126.73 to be credited, wherein a contribution greater than \$99,793.52 would be reflected, with interest it could fluctuate to a total of \$149,793.52, under Act 1, and thus complying with Act 106, guaranteeing that the record contains true and accurate information with respect to each participant.

Moreover, the May 25, 2021 response, received on June 12, 2021, is signed by Ms. Marilisa Marrero Negrón, Director of the Participant Services Unit and not by Mr. Luis M. Collazo Rodríguez, Administrator, Retirement Systems Administration, nor by Omar Marrero, Executive Director, Retirement Board of the Government of PR.

Therefore, I am requesting the petition for appeal as a participant and to be notified of your decision in relation to correcting the contributions up to June 30, 2013 under Act 1, according to the information provided, which must be updated with the interest to date. Likewise, that to which Ms. Marrero, Director of the Participant Services Unit, refers to when stating to update the contributions, if any. Which shows a lack of interest in orienting, clarifying, or correcting, as set forth in Act 106.

I certify that I have addressed a copy of this appeal and Claim under Promesa Title III No. 17 BK 3283-LTS Number 177716 to Prime Clerk, LLC.

Grand Central Station

P.O. Box 4850

New York, NY 10165-4850

ASR-AD-016
REV. MAY-21

RETIREMENT
BOARD OF THE
GOVERNMENT OF
PUERTO RICO



APPLICATION FOR

☐ RECONSIDERATION

☒ APPEAL

☒ PARTICIPANT

☐ RETIREE

☐ BENEFICIARY

The terms for filing are: Reconsiderations before the Administrator, (15) days. Appeals to the Board of Trustees, (30) days. Both are calculated from the date that the decision is mailed, INCLUDING Saturdays, Sundays, and holidays.

Section I – Applicant's Information

Meléndez
Paternal Last Name

Fraguada
Maternal Last Name

Eva Estela
First Name

[REDACTED]-9563
Social Security Number

Retirement System Adm. and
State Insurance Fund Corp.
Agency where you worked

787-394-4756
787-200-0727
Home phone number

Mailing Address:

P.O. Box 361
Development, Condominium, or Barrio

Home Address: ☐ Same as mailing

Urb. Calle Escondido

Development, Condominium, or Barrio

406 Calle Miosotis

P.O. Box No. and Street, Building and Apt., Rural Route
or Highway Contracts Route

Canóvanas, PR 00729
Town, Country, and Zip Code

No. and Street, Building and Apartment, Highway and Km.
marker

Carolina, PR 00987
Town, Country and Zip Code

Section II – Information regarding Service Requested

Information regarding the deceased, if applicable:

N/A
Name

N/A
Social Security Number

The above-referenced petitioner, Eva E. Meléndez Fraguada, **appearing on her own behalf**
by legal representation or guardian, very respectfully STATES, ALLEGES, AND REQUESTS:

1. That the Administrator of the Retirement Systems issued a decision on May 25, 2021, mailed on June 12, 2021, regarding Determination of the Participant Services Unit of the Retirement Board.
2. That I am not satisfied with said decision for the following reasons: The decision received on 6/12/2021, I do not agree for the reasons that I expressed in the Proof of Claim on May 23, 2018, claim 31272, Retirement Systems Administration which was included in the [illeg.] Promesa, and, according to Act 106 of 8/23/2017, no Certification of Contributions had been provided to the employees (See Exhibit I). See sheets and 10 pages (23) additional, according to the instructions.

[illegible signature]
Signature

N/A
Signature of Legal Rep. or Guardian

7/3/2021
Date (month/day/year)

FOR AGENCY USE

Received by:

Name

Position Held

Signature

Date (month/day/year)

Retention period: Same as for the file of which it is part.

RETIREMENT BOARD OF THE GOVERNMENT OF PUERTO RICO
PO Box 42003 San Juan, PR 00940-2203 / Tel. 787-777-1500 / www.retiro.pr.gov

You may also submit your claim electronically by visiting <http://cases.primeclerk.com/puertorico/EPOC-Index>

UNITED STATES DISTRICT COURT FOR THE DISTRICT OF PUERTO RICO / TRIBUNAL DE DISTRITO DE LOS ESTADOS UNIDOS PARA EL DISTRITO DE PUERTO RICO

Fill in this information to identify the case (Select only one Debtor per claim form). /
Llene esta información para identificar el caso (seleccione sólo un deudor por formulario de reclamación).

<input type="checkbox"/> Commonwealth of Puerto Rico El Estado Libre Asociado de Puerto Rico	Case No. 17-bk-03283	Petition Date: May 3, 2017
<input type="checkbox"/> Puerto Rico Sales Tax Financing Corporation (COFINA) La Corporación del Fondo de Interés Apremiante de Puerto Rico	Case No. 17-bk-03284	Petition Date: May 5, 2017
<input type="checkbox"/> Puerto Rico Highways and Transportation Authority La Autoridad de Carreteras y Transportación de Puerto Rico	Case No. 17-bk-03567	Petition Date: May 21, 2017
<input checked="" type="checkbox"/> Employees Retirement System of the Government of the Commonwealth of Puerto Rico El Sistema de Retiro de los Empleados del Gobierno del Estado Libre Asociado de Puerto Rico	Case No. 17-bk-03566	Petition Date: May 21, 2017
<input type="checkbox"/> Puerto Rico Electric Power Authority La Autoridad de Energía Eléctrica de Puerto Rico	Case No. 17-bk-04780	Petition Date: July 2, 2017

MMLID: 1202090

EPOC ID: 170356600251465

COPY

Claim No. [3127]2
Initials [L] [Q]

Debtor Employees Retirement System of the Government of the Commonwealth of Puerto Rico has listed your claim in their Creditor List on Schedule F – Participant Obligations as a Contingent, Unliquidated general unsecured claim in an Undetermined amount. You must timely file a proof of claim or be forever barred from participating or sharing in any distribution or being treated as a claim for purposes of voting or distribution.

El deudor Employees Retirement System of the Government of the Commonwealth of Puerto Rico ha listado su reclamación en la lista de acreedores en el Schedule F – Obligaciones de los participantes como un reclamo Contingente, Sin liquidez no asegurado por un monto Indeterminado. Debe presentar una prueba de reclamación oportunamente o se le prohibirá por siempre participar o compartir en cualquier distribución o ser tratado como un reclamo para fines de votación o distribución.

Modified Official Form 410 / Formulario Oficial 410 Modificado

Proof of Claim / Evidencia de reclamación

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a Title III case. Do not use this form to make a request for payment of an administrative expense, other than a claim entitled to administrative priority pursuant to 11 U.S.C. § 503(b)(9). Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy or subject to confidentiality on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

Lea las instrucciones antes de completar este formulario. Este formulario está diseñado para realizar una reclamación de pago en un caso en virtud del Título III. No utilice este formulario para solicitar el pago de un gasto administrativo que no sea una reclamación que reúna los requisitos para ser tratada como prioridad administrativa conforme al Título 11 § 503(b)(9) del U.S.C. Ese tipo de solicitud debe realizarse de conformidad con el Título 11 § 503 del U.S.C.

Quiénes presenten la documentación deben omitir o editar información que reúna los requisitos para ser tratada con privacidad o confidencialidad en este formulario o en cualquier otro documento adjunto. Adjunte copias editadas de cualquier otro documento que respalde la reclamación, tales como pagarés, órdenes de compra, facturas, balances detallados de cuentas en funcionamiento, contratos, resoluciones judiciales, hipotecas y acuerdos de garantías. No adjunte documentos originales, ya que es posible que los documentos adjuntos se destruyan luego de analizarlos. En caso de que los documentos no estén disponibles, explique los motivos en un anexo.

Fill in all the information about the claim as of the Petition Date.

Complete toda la información acerca de la reclamación a la fecha en la que se presentó el caso.

Part 1 / Parte 1

Identify the Claim / Identificar la reclamación

Who is the current creditor?

EVA E MELENDEZ FRAGUADA

¿Quién es el acreedor actual?

Name of the current creditor (the person or entity to be paid for this claim)
Nombre al acreedor actual (la persona o la entidad a la que se le pagará la reclamación)

Other names the creditor used with the debtor
Otros nombres que el acreedor usó con el deudor



Received

MAY 24 2018

page 1



Modified Official Form 410

Proof of Claim

USDC03 v 01 02.15.2018

Prime Clerk LLC

8. How much is the claim? ¿Cuál es el importe de la reclamación?	\$ 99,793.52 (2013)	Does this amount include interest or other charges? ¿Este importe incluye intereses u otros cargos? <input checked="" type="checkbox"/> No / No <input type="checkbox"/> Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A). Sí. Adjunte un balance con intereses detallados, honorarios, gastos u otros cargos exigidos por la Norma de Quiebras 3001(c)(2)(A).
9. What is the basis of the claim? ¿Cuál es el fundamento de la reclamación?	<p>Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information.</p> <p>Por ejemplo: Venta de bienes, préstamo de dinero, arrendamiento, prestación de servicios, lesiones personales u homicidio culposo, o tarjetas de crédito. Adjunte copias editadas de cualquier documento que respalde la reclamación conforme a lo exigido por la Norma de Quiebras 3001(c). Limite la divulgación de información que reúne los requisitos para ser tratada con privacidad, tal como información sobre atención médica.</p> <p><u>The basis for the claim is that the Retirement Systems Administration was included in the Bankruptcy, Promesa, and has not served employees, as Act 106 explains, with a copy of the statement of contributions.</u></p>	
10. Is all or part of the claim secured? ¿La reclamación está garantizada de manera total o parcial?	<p><input checked="" type="checkbox"/> No / No <input type="checkbox"/> Yes. The claim is secured by a lien on property. Sí. La reclamación está garantizada por un derecho de retención sobre un bien.</p> <p>Nature of property / Naturaleza del bien: <input type="checkbox"/> Motor vehicle / Vehículos <input type="checkbox"/> Other. Describe: Otro. Describir: _____</p> <p>Basis for perfection / Fundamento de la realización de pasos adicionales: _____</p> <p>Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.) Adjunte copias editadas de documentos, si los hubiere, que demuestre la realización de pasos adicionales para hacer valer un derecho de garantía (por ejemplo, una hipoteca, un derecho de retención, un certificado de propiedad, una declaración de financiamiento u otro documento que demuestre que se ha presentado o registrado un derecho de retención.</p> <p>Value of property / Valor del bien: \$ _____ Amount of the claim that is secured / Importe de la reclamación que está garantizado: \$ _____ Amount of the claim that is unsecured / Importe de la reclamación que no está garantizado: \$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.) (La suma del importe garantizado y no garantizado debe coincidir con el importe de la línea 7.) Amount necessary to cure any default as of the Petition Date / Importe necesario para compensar toda cesación de pago a la fecha que se presentó el caso: \$ _____ Annual Interest Rate (on the Petition Date) Tasa de interés anual (cuando se presentó el caso) _____ % <input type="checkbox"/> Fixed / Fija <input type="checkbox"/> Variable / Variable</p>	
11. Is this claim based on a lease? ¿Esta reclamación está basada en un arrendamiento?	<p><input checked="" type="checkbox"/> No / No <input type="checkbox"/> Yes. Amount necessary to cure any default as of the Petition Date. Sí. Importe necesario para compensar toda cesación de pago a partir de la que se presentó el caso: \$ _____</p>	

Modified Official Form 410

Proof of Claim

page 3

US025 v.01 02.15.2018



<p>2. Has this claim been acquired from someone else?</p> <p>¿Esta reclamación se ha adquirido de otra persona?</p>	<p><input checked="" type="checkbox"/> No / No</p> <p><input type="checkbox"/> Yes. From whom? / Sí. ¿De quién?</p>	
<p>3. Where should notices and payments to the creditor be sent?</p> <p>¿A dónde deberían enviarse las notificaciones al acreedor?</p> <p>Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)</p> <p>Norma federal del procedimiento de quiebra (FRBP, por sus siglas en inglés) 2002(g)</p>	<p>Where should notices to the creditor be sent? / ¿A dónde deberían enviarse las notificaciones al acreedor?</p> <p>EVA E MELENDEZ FRAGUADA PO BOX 361 CANOVANAS PR 00729</p> <p>787-394-4756 Contact phone / Teléfono de contacto</p> <p>emetelek@outlook.com Contact email / Correo electrónico de contacto</p>	<p>Where should payments to the creditor be sent? (if different) / ¿A dónde deberían enviarse los pagos al acreedor? (En caso de que sea diferente)</p> <p>Eva E. Meléndez Fraguada Name / Nombre</p> <p>P.O. BOX 361 Number / Número Street / Calle</p> <p>Canovanas PR 00729 City / Ciudad State / Estado ZIP Code / Código postal</p> <p>787-394-4756 Contact phone / Teléfono de contacto</p> <p>emetelek@outlook.com Contact email / Correo electrónico de contacto</p>
<p>4. Does this claim amend one already filed?</p> <p>¿Esta reclamación es una enmienda de otra presentada anteriormente?</p>	<p><input checked="" type="checkbox"/> No / No</p> <p><input type="checkbox"/> Yes. Claim number on court claims registry (if known) / Sí. Número de reclamación en el registro de reclamaciones judiciales (en caso de saberlo)</p> <p>Filed on / Presentada el (MM/DD/YYYY) / (DD/MM/AAAA)</p>	
<p>5. Do you know if anyone else has filed a proof of claim for this claim?</p> <p>¿Sabe si alguien más presentó una evidencia de reclamación para esta reclamación?</p>	<p><input type="checkbox"/> No / No</p> <p><input checked="" type="checkbox"/> Yes. Who made the earlier filing? / Sí. ¿Quién hizo la reclamación anterior?</p> <p>Case # 17-bk-03566 215-2017</p>	

Part 2 / Parte 2:

Give Information About the Claim as of the Petition Date

Complete toda la información acerca de la reclamación desde la fecha en la que se presentó el caso.

<p>6. Do you have a claim against a specific agency or department of the Commonwealth of Puerto Rico?</p> <p>¿Tiene una reclamación en contra de algún organismo o departamento específico del Estado Libre Asociado de Puerto Rico?</p>	<p><input type="checkbox"/> No / No</p> <p><input checked="" type="checkbox"/> Yes. Identify the agency or department and contact name. (A list of Commonwealth of Puerto Rico agencies and departments is available at: https://cases.primeclerk.com/puertorico/.)</p> <p>Sí. Identifique el organismo o departamento y nombre del representante. (Una lista de agencias y departamentos del Estado Libre Asociado de Puerto Rico está disponible en: https://cases.primeclerk.com/puertorico/.)</p>
<p>7. Do you supply goods and / or services to the government?</p> <p>¿Proporciona bienes y / o servicios al gobierno?</p>	<p><input checked="" type="checkbox"/> No / No</p> <p><input type="checkbox"/> Yes. Provide the additional information set forth below / Sí. Proporcionar la información adicional establecida a continuación:</p> <p>Vendor / Contract Number Número de proveedor / contrato:</p> <p>List any amounts due after the Petition Date (listed above) but before June 30, 2017: / Anote la cantidad que se le debe después de la fecha que se presentó el caso (mencionados anteriormente), pero antes del 30 de junio de 2017 \$</p>

Modified Official Form 410

Proof of Claim

page 2

U0504 v.01 02.15.2018

Is this claim subject to a right of setoff? ☐ No / No
☒ Yes. Identify the property /
Si, identifique el bien: _____

¿La reclamación está sujeta a un derecho de compensación?

Is all or part of the claim entitled to administrative priority pursuant to 11 U.S.C. § 503(b)(5)? ☐ No / No
☒ Yes. Indicate the amount of your claim arising from the value of any goods received \$ _____ by the debtor within 20 days before the Petition Date in these Title III case(s), in which the goods have been sold to the debtor in the ordinary course of such debtor's business. Attach documentation supporting such claim.

¿La reclamación, total o parcial, cumple los requisitos para ser tratada como prioridad administrativa conforme al Título 11 § 503(b)(5) del U.S.C.?

Si, indique el importe de la reclamación que surge del valor de cualquier bien recibido por el deudor dentro de los 20 días anteriores a la fecha de inicio en estos casos del Título III, en el que los bienes se han vendido al deudor en el transcurso normal de los negocios del deudor. Adjunte la documentación que respalda dicha reclamación.

Part 3 / Parte 3:

Sign Below / Firmar a continuación

The person completing his proof of claim must sign and date it.
FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

La persona que complete esta evidencia de reclamación debe firmar e indicar la fecha.
FRBP 9011(b).

Si presenta esta reclamación de manera electrónica, la FRBP 5005(a)(2) autoriza al tribunal a establecer normas locales para especificar qué se considera una firma.

Check the appropriate box / Marque la casilla correspondiente:

- ☒ I am the creditor. / Soy el acreedor.
☐ I am the creditor's attorney or authorized agent. / Soy el abogado o agente autorizado del acreedor.
☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004. / Soy el síndico, el deudor o su agente autorizado. Norma de quiebra 3004.
☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005. / Soy el garante, fiador, endosante u otro codeudor. Norma de quiebra 3005.

I understand that an authorized signature on this Proof of Claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

Comprendo que una firma autorizada en esta Evidencia de reclamación se considera como un reconocimiento de que al calcular el importe de la reclamación, el acreedor le proporcionó al deudor crédito para todo pago recibido para saldar la deuda.

I have examined the information in this Proof of Claim and have a reasonable belief that the information is true and correct.

He leído la información en esta Evidencia de reclamación y tengo motivos razonables para suponer que la información es verdadera y correcta.

I declare under penalty of perjury that the foregoing is true and correct. / Declaro bajo pena de perjurio que lo que antecede es verdadero y correcto.

Executed on date / Ejecutado el _____ (MM/DD/YYYY) / (DD/MM/AAAA)

Signature / Firma _____

Print the name of the person who is completing and signing this claim / Escriba en letra de imprenta el nombre de la persona que completa y firma esta reclamación:

Name

Eva E. Meléndez Fraguada

First name / Primer nombre Middle name / Segundo nombre Last name / Apellido

Title / Cargo

Analyst at the Human Resources Administration

Company / Compañía

Identify the corporate servicer as the company if the authorized agent is a servicer.
Identifique al recaudador corporativo como la compañía si el agente autorizado es un recaudador.

Address / Dirección

P.O. BOX 361

Number / Número Street / Calle

Camaguey

City / Ciudad

PR

State / Estado

00729

ZIP Code / Código postal

Contact phone / Teléfono de contacto

787-394-4756

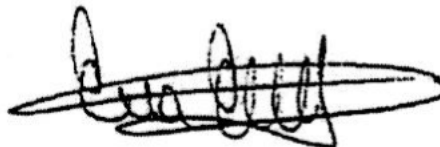
Email / Correo electrónico

eva.estel@worldnet.att.net

[hw:] **Exhibit II**

Act 1 (2/20/1990 through 6/30/2013)

Year	Retirement Contribution
2013	\$8,818.92
2012	7,809.84
2011	7,807.64
2010	7,710.45
2009	7,611.12
2008	7,422.91
2007	6,276.72
2006	5,924.84
2005	6,240.50
2004	4,780.18
2003	4,446.02
2002	4,000.00
2001	3,689.51
2000	2,947.00
1999	3,000.00
1998	3,080.85
1997	2,262.95
1996	2,752.05
1995	1,417.50
1994	1,355.42
1993	250.00
1992	189.50
Total	\$ 99,793.52

A handwritten signature in black ink, appearing to be "Ana Maria", written over a horizontal line.

[illegible Puerto Rico agency logo]

ESTIMATED ACCOUNT STATEMENT

November 9, 2017

Agency: 163 - STATE INSURANCE FUND CORPORATION

EVA MELÉNDEZ FRAGUADA
PO BOX 361
CANÓVANAS, PR 00729

Social Security: XXX-XX-9563

Based on the information in our records, as of November 9, 2017, you have:

Date of Birth: [REDACTED], 1966

Sex: Female

Date of Entry into Public Service: August 31, 1990

Contribution Start Date: August 31, 1990

<i>Act 1 as of June 30, 2013</i>	<i>Act 3 as of December 31, 2016</i>
Years Credited: 21.25	Years Credited: 4.01
Contributions: \$92,666.79	Contributions: \$39,518.50
Interest: \$20,160.98	Interest: \$3,135.84
Maintenance Fees: \$0.00	Maintenance Fees: \$0.00
Total Contributions: \$112,827.77	Total Contributions: \$42,654.34
SNC Paid: \$0.00	Benefit: \$0.00
SNC Time: 0.00	
Benefit: \$0.00	

It is important to highlight that the Individual Contribution Balance reflected is the accumulation of the amount contributed towards Retirement up to the date of the last payroll processed in the system. The Individual Contribution and Years of Service balances reflected herein are subject to revision.

If the information is not consistent with your records, you must contact the Retirement Affairs Coordinator for your Agency or Municipality. In addition, you can access this information using the Online Services section of the Retirement Internet Portal: <http://www.retiro.pr.gov>.

We remind you that, prior to filing a pension application, you must request an official Account Statement through your Coordinator.

Cordially,

Account Statements Office
Participants Unit

Plaza Retiro, 437 Ave. Ponce de León, San Juan, PR 00917-3711
PO Box 42003, San Juan, PR 00940-2203
Tel: 787-754-4545
www.retiro.pr.gov



**UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF PUERTO RICO**

In re:

THE FINANCIAL OVERSIGHT AND
MANAGEMENT BOARD FOR PUERTO RICO,

as representative of

THE COMMONWEALTH OF PUERTO RICO, *et*
al.,

Debtors.¹

PROMESA

Title III

No. 17 BK 3283-LTS

(Jointly Administered)

ADMINISTRATIVE CLAIM RECONCILIATION NOTICE

Service Date: **June 10, 2021**

Designated Claimant(s): **Melendez Fraguada, Eva E.**

Address: **PO BOX 361**

Canovanas, PR 00729

Designated Claim Number(s): **177716**

Amount(s) Stated in Proof(s) of Claim: **\$99,793.52**

Claim Type: **Public Employees and Pension/Retirement**

This notice applies only to the designated claim numbers previously listed. Read the notice carefully and discuss it with your attorney. If you do not have an attorney, you can consult one.

¹ The Debtors in these Title III Cases, along with each Debtor's respective Title III case number and the last four (4) digits of each Debtor's federal tax identification number, as applicable, are the (i) Commonwealth of Puerto Rico (the "Commonwealth") (Bankruptcy Case No. 17 BK 3283- LTS) (Last Four Digits of Federal Tax ID: 3481); (ii) Puerto Rico Sales Tax Financing Corporation ("COFINA") (Bankruptcy Case No. 17 BK 3284-LTS) (Last Four Digits of Federal Tax ID: 8474); (iii) Puerto Rico Highways and Transportation Authority ("HTA") (Bankruptcy Case No. 17 BK 3567- LTS) (Last Four Digits of Federal Tax ID: 3808); (iv) Employees Retirement System of the Government of the Commonwealth of Puerto Rico ("ERS") (Bankruptcy Case No. 17 BK 3566- LTS) (Last Four Digits of Federal Tax ID: 9686); (v) Puerto Rico Electric Power Authority ("PREPA") (Bankruptcy Case No. 17 BK 4780-LTS) (Last Four Digits of Federal Tax ID: 3747); and (vi) Puerto Rico Public Buildings Authority ("PBA") (Bankruptcy Case No. 19-BK-5532-LTS) (Last Four Digits of Federal Tax ID: 3801) (Title III case numbers are listed as Bankruptcy Case numbers due to software limitations).

your collective bargaining agreement to find more information regarding the steps that will be taken to resolve your claim, the timing for resolving your claim, and any appeal rights you may have.

If at any point you receive an Initial Determination, but you do not file an appeal within the applicable time lines above, your claim will be designated as "resolved," and you will be paid the amount, if any, determined by the administrative procedures.

Should you have any questions, contact Prime Clerk LLC at (844) 822-9231 (toll-free for the U.S. and Puerto Rico), or (646) 486-7944 (for international calls), available from 10:00 a.m. to 7:00 p.m. (Atlantic Standard Time) (Spanish available).

With this Administrative Claim Reconciliation Notice, the **Employees' Retirement System** presents the claims previously identified (the "Designated Administrative Reconciliation Claim(s)") under the Title III case of the **Employees' Retirement System** for resolution by administrative claim reconciliation, in accordance with the procedures ("Administrative Reconciliation Procedures") established by the **Order** issued by the United States District Court for the District of Puerto Rico (the "Title III Court") on March 12, 2020 [ECF No. 12274-2]. Said order: **(A) Authorizes the Administrative Reconciliation of Claims; (B) Approves an Additional Type of Notice; and, (C) Grants the Appropriate Relief.** Prime Clerk is hereby authorized and ordered to indicate in the Claim Record for these Title III cases that the Claim(s) Designated for Administrative Reconciliation are "Subject to Administrative Reconciliation." A copy of the Administrative Reconciliation Procedures is enclosed for your reference.

The purpose of the Administrative Claims Reconciliation Procedures is to allow the Commonwealth to evaluate and resolve the claims filed by you using its existing administrative procedures. Only certain types of claims are eligible to participate in the Administrative Reconciliation Procedure: claims for retirement or pension benefits ("Claims for Retirement/Pension"), claims for reimbursement of contributions ("Contribution Reimbursement Claims"), claims for salaries and benefits owed to public employees ("Public Employee Claims"), and union grievances ("Claims for Complaints/Grievances"). In order to obtain information regarding the administrative processes applicable to your claim, consult the "General Description of the Administrative Claim Reconciliation Procedures."

In order to guarantee that the claims are resolved and paid in a timely manner, the Administrative Claim [Resolutions] shall be monitored by the Title III Court and the **Employees' Retirement System** must report to the Title III Court **every 60 days** regarding the status of all claims submitted to Administrative Reconciliation Procedures.

You do not need to do anything else at this time. Within the next 60 days, a representative of the following agency will contact you and initiate the Administrative Reconciliation Procedure to Resolve your Administrative Claim:

State Insurance Fund

If you are not contacted by a representative of the agency within the **SIXTY DAYS FOLLOWING THE "NOTICE DATE" THAT APPEARS AT THE TOP OF THIS NOTICE, CONTACT PRIME CLERK.**

General Description of Administrative Claim Reconciliation Procedures

You are receiving this notice because the Debtors have determined that your claim(s) must be resolved using the Commonwealth's existing administrative procedures. Your claim shall be resolved using one of the procedures identified below. Please consult the Administrative Dispute Resolution Notice accompanying this General Description to determine which procedures will be followed in processing your claim. This General Description provides basic information regarding the next steps in resolving your claim and the administrative procedures that shall be used in considering your claim. **Read this General Description carefully and discuss it with your attorney. If you do not have an attorney, you may wish to consult with one.**

Within the sixty (60) days following receipt of this notice, a representative of a Commonwealth agency responsible for processing your claim will get in touch with you to notify you that said agency has started processing your claim. IF YOU ARE NOT CONTACTED BY ANY AGENCY OF THE COMMONWEALTH WITHIN SIXTY (60) DAYS, PLEASE CONTACT PRIME CLERK IMMEDIATELY.

Once the RSA, Treasury, or corresponding Agency of the Commonwealth has reached an initial determination (the "Initial Determination") with regard to the amount, if any, of your claim, they will send you a letter notifying you of the decision.

If you do not agree with the Initial Determination, you have the right to appeal. The terms and procedures applicable to said appeal vary based on the type of appeal you file:

- **Pension/Retirement Claims:** If you do not agree with the RSA, you will have thirty (30) days from the date of the letter to request reconsideration. If you request reconsideration, a hearing officer will hold a hearing to consider your claim. You will receive the RSA's decision within forty-five (45) days from the hearing. If the RSA denies the reconsideration of your claim, you will have to file an appeal before the Retirement Board within thirty (30) days from the date when the reconsideration is denied. If your appeal is denied, you will have to file an appeal with the Court of Appeals of Puerto Rico within thirty (30) days from the date of the Retirement Board's decision.
- **Contributions Reimbursement Claims:** If you do not agree with the Initial Finding of the Department of Treasury, you can file a lawsuit with the Trial Court within thirty (30) days following the date that the letter from the Treasury was sent.

- **Public Employee Claims:** The Commonwealth has many administrative processes, handled by many different entities, for employees to bring employment-related claims. If you do not agree with an Initial Determination by a corresponding agency, you have the right to appeal, including the right to appeal that Initial Determination before the Court of Appeals of Puerto Rico. The period of time within which you should file your appeal can be determined with your lawyer. If you do not have a lawyer, you may wish to consult with one.
- **Claims based on Complaints/Grievances:** If you have a claim related to complaints/grievances, same shall be processed in accordance with the terms of your collective bargaining agreement. You should review your collective bargaining agreement to obtain more information regarding the steps to take to resolve your claim, the time periods to resolve it and the appeal rights you may have.

If, at some point in time, you receive an Initial Determination but do not file an appeal within the aforementioned timeframes, your claim shall be marked as “resolved” and the amount determined by the administrative procedures, if any, shall be paid to you.

Administrative Claims Reconciliation Procedures

1. The Pension/Retiree Claims, the Tax Refund Claims, the Public Employee Claims, and the Grievance Claims will be subject to Administrative Claims Reconciliation in two instances:

- a. Within one hundred twenty (120) days of approval of these procedures by the Court, and every sixty (60) days thereafter, the Commonwealth, on behalf of itself and the other Debtors, shall file with the Title III Court and serve upon the claimants a notice, the form of which is annexed hereto as Exhibit 2 (the "Administrative Reconciliation Notice"), informing such claimant that its Claim shall be handled in accordance with the aforementioned Administrative Claims Reconciliation process. The Administrative Reconciliation Notice will designate whether each Claim is to be resolved using the Pension/Retiree Procedures, the Tax Refund Procedures, the Grievance Procedures, or the Public Employee Procedures.
- b. In the event that (i) the Debtors file an omnibus objection to Claims, (ii) a claimant objects to the relief requested in such omnibus objection, and (iii) the Court or the Debtors determine that such Claim should be subject to Administrative Claims Reconciliation, the Debtors shall file an Administrative Reconciliation Notice with the Court and serve the Administrative Reconciliation Notice upon the Claimant stating that such Claim has been removed from the omnibus objection and shall be subject to the Administrative Claims Procedures. If the Debtors make such determination, on the date when the Debtors' reply in support of its omnibus objection is due, the Debtors shall file an Administrative Reconciliation Notice with the Court setting forth the Claims to which an omnibus objection has been interposed and responded to by the holder thereof as and to which the Debtors have determined should be subject to the Administrative Claims Reconciliation process. If the Court makes such determination, the Court shall provide notice to the Debtors, and the Debtors shall file such an Administrative Reconciliation Notice with the Court. To the extent necessary, the automatic stay, extant pursuant to section 362 of the Bankruptcy Code, should be deemed modified so as to permit the continuation of the reconciliation of any claims subject to Administrative Claims Reconciliation.

2. With respect to each of the Pension/Retiree Claims, the Tax Refund Claims, the Public Employee Claims, and the Grievance Claims, upon reconciliation, the Debtor(s) shall pay the amount due and owing in the ordinary course.

3. Upon the filing of the Administrative Reconciliation Notice, any claims subject thereto (the "ACR Designated Claims") shall be designated as "Subject to Administrative Reconciliation" on the Claims Registry in these Title III Cases. The Administrative Reconciliation Notice shall authorize and direct Prime Clerk to mark all claims listed on the Administrative Reconciliation Notice as "Subject to Administrative Reconciliation" on the official claims register in these Title III Cases.

Eva E. Meléndez Fraguada

December 19, 2019

Retirement Board
Government of Puerto Rico
Retirement Plan 106
P.O. Box 194533
San Juan, P.R. 00919-4533

Prime Clerk
830 Third Ave., 9th Floor
New York, NY 10022
(In re Commonwealth of PR,
Case No. 17-03283
United States Bankruptcy
Court for the District
Proof of Claim No. 31272, 30917

RETIREMENT PLAN ACCOUNT ACT 106

On December 14, 2019, I received a letter by mail from the Retirement Board of the Government of PR, advising that the Board is allowing you to take the reins of my future and take control of my account under Retirement Plan 106.

It explains that there are two main phases that will begin on December 19, 2019, indicating what the first phase consists of: accessing my account through Plan106info.com, choosing the investment fund and designating beneficiaries, among other transactions, tools available and educational resources that will help you obtain the necessary knowledge in accordance with my interests and needs.

They indicate that, during the second phase is when I will have access to see my accumulated balance, the investment funds selected during the first phase will be effective, I will be informed of the start date of this phase later on (See Exhibit 1).

I wish to advise that I do not agree with the letter received on December 14 of 2019, which is not in compliance with the stipulations of Act 106 of August 23, 2017, which indicates that this law seeks to safeguard the well-being of Retirees and Public Servants.

In Chapter I – General Provisions of Act 106 of August 23, 2017, Article 1.4 – Public Policy, Para. 2, sets forth: it is declared as public policy to hereby protect the future of our public servants, we ensure that they can have a dignified retirement, free of uncertainty, segregating their personal contributions, guaranteeing same, and establishing a new contribution plan as defined in a trust or similar instrument that will allow us to protect and guarantee their contributions in separate accounts.

Eva E. Meléndez Fraguada

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In Chapter 2 – Account for the payment of Accumulated Pensions by the Retirement Systems, Article 2.2 – Record of Accumulated Pensions, sets forth in the first paragraph, that a record of each participant, beneficiary, and retiree of the Retirement System shall be created and kept, and must reflect in detail the amounts corresponding to each one, as Accumulated Pension, according to their respective Retirement System until the date that the present Act enters into force; it shall list, without implying a limitation, the accumulated benefit to which the participant is entitled and the employment history and contributions made, in accordance with each applicable Retirement Law covering the participant, beneficiary, or retiree. Under numbers one (1) and two (2), it sets forth a term of sixty (60) days from the date of the passing of said law to produce a list of all beneficiaries and retirees of the Retirement System (Act 447, Act 1, and Act 106).

Within a term of no more than one hundred and eighty (180) days from the date that this Act is passed, they shall have to produce a record of all participants, to include the Accumulated Pension of each of the three Retirement Systems, at the time that the present Act enters into force and the terms of payment of same. The three Retirement Systems must take all necessary measures to guarantee that the record contains true and accurate information with respect to each Participant, Beneficiary, or Retiree. Paragraph Four (4) sets forth that if a Participant, Beneficiary, or Retiree is unsatisfied with the determination of the Retirement Systems Administration under the previous paragraph, said individual shall have to file a request for reconsideration within a term of twenty (20) days, counted from the date that the Retirement Systems Administration decision is served. If no reconsideration is filed, the decision shall become firm and final.

Based on all of the foregoing reasons, I do not agree with the rulings of the Retirement Board of the Government of Puerto Rico, which have not been in compliance with the established terms of Act 106. Moreover, they have erred with regard to the established phases, which must be done in reverse, wherein the participant can obtain a direct orientation ahead of time. To be certain about the accumulated balance and interests, Direct orientation regarding the different types of investments, free of uncertainty, offer an option for the employee's own choice and a more complete orientation that is not just a lecture on such an important subject as this one. The period in which this was implemented was not appropriate, as many employees go on vacation and take days off due to holidays. Moreover, it's been suggested that the Alight Solution company is not in Good Standing, information that has not been discussed with the employees, considering the way that our contributions have been put at risk and through the same means they've verbalized that they are not secured accounts, they place us in a defenseless position as no correct information has been provided to employees.

An example of this was the evidence sent by the undersigned with the Proof of Claim, wherein the balance accumulated under Act 1 as of June 30, 2013, is not correct (See Exhibit 2).

Therefore, I request that the Retirement Board of the Government of Puerto Rico comply with

Eva E. Meléndez Fraguada

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what we were informed of by way of Act 106.

It is worth pointing out that, as a contributor, I fulfill my tax responsibilities to the Government of Puerto Rico, and therefore I should not be penalized for mistakes made by third parties.

As an employee of the State Insurance Fund Corporation, by way of Act 66 of 2013, they decided to change my benefit from the Retirement System, despite being a solvent Corporation. In addition, they eliminated many of our fringe benefits that we obtained as employees.

However, Chapter 2 Act 106 of August 23, 2017, itself sets forth that the accumulated pensions of judges who were contributing and those who had recently joined the Retirement System for the judiciary who would be appointed after the Act entered into force (106), would continue being calculated in accordance with the Judiciary Retirement Law, applicable to each judge. It is expressly provided that said accumulated pensions, as well as the terms for payment of same, shall not be affected or modified in any way by the provision of this Act. I understand that, likewise, it should have been specifically applied to employees under Act 447 and Act 1 of the State Insurance Fund Corporation, which should not have been included in Act 66, to thus obtain a dignified retirement.

Therefore, I request that the Retirement Board of the Government of PR be ordered as follows:

1. The possibility of honoring the Retirement System, as established at its origin and respective laws for employees under Act 447 and Act 1 of the State Insurance Fund Corporation, to thus obtain a dignified retirement as applied for the Judiciary Retirement System.
2. Take into consideration case #SJ 2019CV 07928 pending before the Trial Court, Superior Court of San Juan, PR, brought by the Association of Managerial Employees of the State Insurance Fund Corporation, in re Declaratory Judgement on Unconstitutionality of Article 3.1 b1, 3.1 b2, 3.2, 3.4 of Act 106 of August 23, 2017. And, as an employee, that I may freely select where I wish to place the contributions made to date.
3. That, when transferring my file in the Retirement System that it determines to choose, to transfer my last designation of beneficiary submitted to said entity on December 6, 2018, which should remain active, until the participant may decide to make a change (See Exhibit III).
4. That the interest accumulated in relation to the Retirement System under Act 106, be included.
5. That I be presented with an Employment History with the contributions made for correction of the difference found in the Retirement System under Act 1. Likewise, to receive detailed orientation regarding the Retirement System under Act 3 and 106.
6. That I be informed of the correct accumulated interest amount to date for the Retirement System under Act 1, 3, and 106.

Eva E. Meléndez Fraguada

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Given the fact that the employer contributions that the government used to make towards the public employees' Retirement Systems were eliminated by way of Act 106. [sic.] In addition, it is optional for the Governor of PR, for all Government Secretaries, Heads of Agencies and public instrumentalities, the assistants and consultants of the Governor, members of committees and boards named by the Governor, members of the legislative assembly, employees, and officials of the legislative assembly and the Office of Legislative Services, the Comptroller of PR. It is also optional for employees of the Department, divisions, sections, offices, dependencies, public corporations, and instrumentalities of the government of PR, that work and reside outside of the territorial limits of PR. I should likewise have the opportunity to determine my savings plan for future use.

With regard to the investment fund, depending on the investment alternative that the public servant chooses from those that are provided. [sic.] This money would be subject to "additional handling costs and extraordinary costs, as the Retirement Board may determine," of which I have not been informed.

Moreover, it indicates that the Act creates a Retirement Board of the Government of PR. Same is comprised of 13 members. Of these, eight (8) are directly or indirectly appointed by the Governor. The other three (3) are appointed by the Federation of Mayors, the Association of Mayors, and the Supreme Court, therefore, it can be observed that they no representation for public employees was appointed, which is why we are placed in a defenseless position.

Therefore, seeing as the government of PR does not contribute anything to my retirement, this Act 106 is unconstitutional, as it is not uniformly applied to the entire working class, including the private sector. Moreover, I am being deprived [of] making immediate use of my money with the purpose of making my own decision, wherein I establish my savings Plan for future use.

Eva E. Meléndez Fraguada

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I request that all of the foregoing information be taken into consideration and that an order be issued for the Retirement Board of the Government of PR so that its employees under Acts 447 and 1 may obtain a dignified Retirement, as was done for the Judicial System and others in PR.

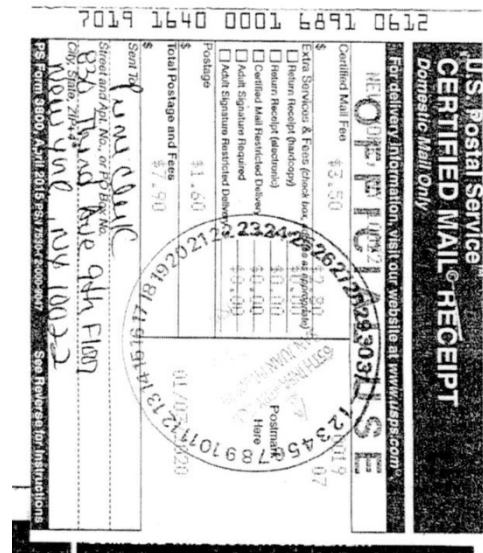
I remain at your orders and await to receive the determinations made in relation to this petition.

Cordially,

[illegible signature]

Eva Estela Meléndez Fraguada
Human Resources Administrative Analyst V
Staff
SIFC Recruitment
787-793-5959 x 5486
787-394-4756
P.O. Box 361
Canóvanas, PR 00729

Copy: Leonaldo Delgado Navarro, Esq.
leonaldodelgadonavarro@gmail.com
Ramon Rodríguez Melendez, Esq.
José E. Ortiz Torres, Esq., AEGCFSE



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece or on the front if space permits.

1. Article Addressed to:

Justa de Retiro
Gobierno PR
P.O. BOX 194533
San Juan, PR 00918-4533

9590 9402 5273 9154 3612 17

2. Article Number (Transfer from service label)

7019 1640 0001 6891 0605

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

A. Signature
X Jonathan Ortiz

B. Received by (Printed Name)
Jonathan Ortiz

C. Date of Delivery
1/8/2020

D. Is delivery address different from item 1? ☐ Yes ☒ No
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HATON JAN - 8 2020 R 00918



GOVERNMENT OF PUERTO RICO

RETIREMENT BOARD OF THE GOVERNMENT OF PUERTO RICO

May 25, 2021

CERTIFICATION WITH RETURN RECEIPT

Eva Meléndez Fraguada
PO Box 361
Canóvanas, PR 00729

Dear Mr./Mrs. Meléndez,

Receive a cordial greeting on behalf of all of us who work at the Retirement Board of the Government of Puerto Rico, hereinafter the "Retirement Board." The present letter shall serve as the determination of the Participant Services Unit of the Retirement Board of the Government of Puerto Rico in relation to **Proof of Claim No. 31272** dated December 9, 2020, and which was referred for Administrative Reconciliation Procedures within the Title III Process of the Retirement Systems Administration of the Employees of the Government of Puerto Rico and the Judiciary.

Article 5-110 of Act 447 of May 15, 1951, as amended, sets forth that the benefits upon separation from public service are: upon permanent separation from public service, when the separation is not due to death or total and permanent disability, the balance in the Hybrid Program participant's account shall be distributed to the participant if the participant fulfills any of the following requirements: (i) has completed less than five (5) years in public service or, (ii) has accumulated an amount equal to or less than ten thousand dollars (\$10,000.00) within the System.

After having evaluated your information in our automated systems, I inform you that you have conserved benefits under **Act 1-1990, as amended**. Currently, and based on the information in our database, you have accumulated **\$131,378.79** in contributions and/or 21.25 years counted through June 30, 2013. You are advised that you are currently an active participant, which means that you have not separated from public service. You will be entitled to receive pension benefits upon reaching 65 years of age. You may request an Account Statement when you are due to receive your pension benefits, three (3) years prior to reaching the required age for updating your contributions, if any. Nonetheless, when you file for your pension, the Participant Services Unit shall update and correct same in the system. This communication does not constitute an official account statement. The information contained in the participant's file may affect the balances reported herein.

If you do not agree with this determination, you may file a request for reconsideration. For these purposes, enclosed please find a Sheet containing Notices and general rules that apply to petitions for reconsideration or appeal. You have a period of twenty (20) days from the date of the notice of this determination to file a request for reconsideration, or thirty (30) calendar days to file an appeal before the Retirement Board of the Government of Puerto Rico.

Please take into account that this Administrative Claim Reconciliation Procedure does not affect, nor is it related to, whether the Adjustment Plan will impact your pension. If the Adjustment Plan will affect the amount of your pension, you will have the opportunity to participate in the Adjustment Plan process in due time.

Avenida Arterial Hostos 235 - Capital Center - Torre Norte piso 8 | PO Box 42003, San Juan, PR 00940-2203

877-777-1500 www.retrop.org

Cordially,

[illegible signature]

Marlisa Marrero Negrón
Director
Participant Services Unit

XXX-XX-9563

[hw:] Eva

December 9, 2020

Mr. Luis M. Collazo Rodriguez
Administrator
Retirement Systems Administration of the employees of the PR Government and Judiciary
P.O. Box 42003
San Juan, PR 00940-2203
Tel. 787-777-1500
www.retiro.pr.gov
servicioretiro@retiro.pr.gov

Omar Marrero
Executive Director
Retirement Board Government of PR
P.O. Box 194533
San Juan, PR 00919-4533

Administrative Reconciliation – Title III Promesa 17 BK 3283-LTS

The U.S. District Court issued an Administrative Reconciliation Order for the District of PR, on March 12, 2020. Said Order authorized the administrative reconciliation, service, and appropriate relief. It indicates that, in order to guarantee that the claims are resolved and paid in a timely fashion, the administrative claims shall be monitored by the Title III Court and the Employees' Retirement System, and there must be a report to the Title III Court every 60 days regarding the status of all claims that are subject to Administrative Reconciliation procedures. In addition, it sets forth that, within 60 days of November 6, 2020, a representative of the Retirement System of the Employees of the Government of the Commonwealth of PR will contact me (Eva Estela Melendez Fraguada, Claimant 31272, Retire Claims [sic.]) and initiate the Administrative Reconciliation Procedure. (see attached Administrative Reconciliation Procedure).

At present, so you are aware, I have not received any type of communication from any representative from Retirement since the date of the notice of Retirement. For purposes of making all parties aware,

[hw:] 7/1/21 Raul Andrades
Sent email
puertoricoinfo@primeclerk.com

the Retirement System Administration has not attended to this claim since it was notified of same when the case started through the Proof of Claim. Therefore, the government of PR passed Act 80 Incentivized Retirement of 2020 for employees of the government of PR who comply with the requirements, which at present remained pending until there is an agreement between the parties, government of PR, Fiscal Oversight Board and AAFAF. To this effect, it is important that this claim be addressed, as the amount of the contribution that you indicate that I have contributed to the Retirement System Administration is incorrect, therefore, the interest adjudicated is also incorrect, for purposes of pension calculation. I would appreciate compliance with the Order issued. If I do not receive notice for an appointment within the stipulated period, I will proceed with the notice to Prime Clerk, as informed by said entity.

Cordially,

[illegible signature]

Eva Estela Meléndez Fraguada

Administrative Analyst [cut off text]

Recruitment

SIFC Central Office

Tel. : 787-394-4756

787-793-5959 x 5486

evaestella@outlook.com

Copy: Prime Clerk

830 Third Ave., 9th Floor

New York, NY 10022

(in re Comm. P.R. Case

No. 17-03283

United States Bankruptcy

Proof of Claims no. 31272

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p><i>Luis M. Meléndez Fraguada</i> <i>Administración Sincrona</i> <i>San Juan, P.R. 00940-2203</i></p> <p>2. Article Number (Transfer from service label)</p> <p>7020 2450 0001 7006 3346</p>		<p>A. Signature</p> <p><i>X</i> <i>HCC</i></p> <p>B. Received by (Printed Name)</p> <p><i>ASR</i></p> <p>C. Date of Delivery</p> <p><i>10/17/2020</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail®</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Priority Mail Express</p> <p><input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Signature Confirmation</p> <p><input type="checkbox"/> Signature Confirmation Restricted Delivery</p>		<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p> <p>Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p><i>Donar Apurto</i> <i>Junta Administradora</i> <i>P.R.</i> <i>P.O. BOX 194533</i> <i>San Juan, P.R. 00919-4533</i></p> <p>2. Article Number (Transfer from service label)</p> <p>7020 2450 0001 7006 3360</p>		<p>A. Signature</p> <p><i>X</i> <i>Donar Apurto</i></p> <p>B. Received by (Printed Name)</p> <p><i>Donar Apurto</i></p> <p>C. Date of Delivery</p> <p><i>11/17/21</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail®</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Priority Mail Express</p> <p><input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Signature Confirmation</p> <p><input type="checkbox"/> Signature Confirmation Restricted Delivery</p>		<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p> <p>Domestic Return Receipt</p>	

[TN: *duplicate of previous page*]

ASR-AD-025
Oct. 20

**ELECTIVE PARTICIPATION FORM
INCENTIVIZED RETIREMENT PROGRAM
ACT 80 OF AUGUST 3, 2020
(PARTICIPANTS ACT 1 - 1990)**



PARTICIPANT INFORMATION			
Participant's Name		Social Security No.	Date of Birth (month/day/year)
Eva Estela Meléndez Fraguada		9563	██/██/66
Indicate the Type of Agency or Employer where you Work			
<input type="checkbox"/> Central Government Act 129 "Public-Private Partnership" <input type="checkbox"/> Municipality <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Other			
<input type="checkbox"/> Central Government Act 122 "New Government" Restructuring or Equivalent Legal Entity			
Name of Agency or Employer		Position Held	Email
State Insurance Fund Corporation		Administrative Analyst - Human Resources V	evaestella@outlook.com
Appointment Type			
<input type="checkbox"/> Public trust with reinstatement rights <input type="checkbox"/> Term, expiration date: <u>7/1/90</u> (month/day/year)			
<input type="checkbox"/> Public trust without reinstatement rights <input checked="" type="checkbox"/> Career			
Are you on Unpaid Leave?	Date of Unpaid Leave (month/day/year)	Monthly Gross Salary	Have You Requested Reimbursement of Contributions?
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	--	\$8,065.00	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
NOTICE			
<p>Your choice to participate in the Incentivized Retirement Program shall be <u>final and irrevocable</u>; and it constitutes a complete and absolute release, and waiver of rights to all claims that you may have, for past, present, or future actions based on the employer/employee relationship, based on: (i) the employment relationship or termination of same under any applicable law; or, (ii) the actions, if any, that could be taken as a result of the implementation of the Program. This waiver of rights shall have the effect of a complete transaction, of all actions or rights, existing or potential, known or unknown, that the employee has, may have, or has had, related to his or her employment and/or separation from same. This effect of release and the corresponding waiver of rights shall be an effect of <i>res judicata</i>. Likewise, when joining the benefits of the Incentivized Retirement Program you shall not be able to provide your services under any classification as an employee for any agency, corporation, and/or municipality of the Government of Puerto Rico; for a term of seven (7) years after your participation in the Program.</p> <p>Once this period has expired, you may provide services in accordance with the requirements set forth by Act 447 of May 15, 1951, as amended, as well as those of Act 1-2012, better known as "Government Ethics Act of Puerto Rico." Although your application is irrevocable, please be advised that same is subject to approval by the Office of Management and Budget of the Government of Puerto Rico, to certification of final eligibility by the Retirement Systems Administration, and to whether the position you hold fulfills the requirements for purposes of implementation of the Program.</p> <p>By signing this document, you certify the following: 1) That you have read same in its entirety; 2) That you are signing it freely and voluntarily; and, 3) That you agree and understand the content and its terms, of Act 80 of August 3, 2020, better known as the "Incentivized Retirement Program and Justice for Our Public Servants Act."</p> <p>The date of separation from service provided by your employer, is an estimate. The Employer shall have the ability to extend same in the event that it is determined that your position and/or functions are essential, it is determined that there is a service need, and/or other related issues. However, the separation date may not be later than December 31, 2022.</p> <p>[handwriting - not sufficiently legible]</p>			
<u>Eva Estela Meléndez Fraguada</u>		<u>[illegible signature]</u>	<u>1/20/2021</u>
Participant's Name		Signature	Date (Month/Day/Year)

Retention period: Same as for the file of which it is a part.

Page 1 of 2

RETIREMENT BOARD OF THE GOVERNMENT OF PUERTO RICO AND THE JUDICIARY
PO Box 42003 San Juan, PR 00940-2203 / Tel. 787-777-1500 / www.retiro.pr.gov

ASR-AD-025
Oct. 20

**ELECTIVE PARTICIPATION FORM - INCENTIVIZED RETIREMENT PROGRAM
ACT 80 OF AUGUST 3, 2020 (PARTICIPANTS ACT 1 - 1990)**

CERTIFICATION OF THE AUTHORIZED HUMAN RESOURCES OFFICIAL

Having reviewed this **Application for Elective Participation in the Incentivized Retirement Plan under Act 80 of August 3, 2020, better known as the "Incentivized Retirement Program and Justice for Our Public Servants Act,"** I certify that the information is correct and consistent with the information registered at the Office of Human Resources and with the Retirement Affairs file.

Once this position becomes vacant, same shall be frozen in accordance with Article 9a of Act 80-2020.

Participant's Name

Name of Agency or Employer

After analyzing the Scaled Retirement Plan, we determined that the participant's position:

☐ Is an essential position

☐ Is not an essential position

Employee's Estimated Separation Date (Month/Day/Year)

Indicate the reasons for the separation:

Name of Human Resources Director

Signature

Date (Month/Day/Year)

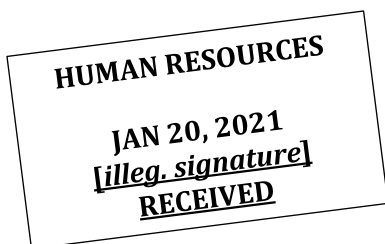
Name of Appointing Authority or
Authorized Official

Signature

Date (Month/Day/Year)

Retention period: Same as for the file of which it is a part.

Page 2 of 2



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GOVERNMENT OF PUERTO RICO
State Insurance Fund Corporation

Central Office

November 24, 2020

TO ALL EMPLOYEES

[illegible signature]

Raquel Cumba Sanchez

Adjunct Human Resources Administrator

**MEMORANDUM REGARDING THE
INCENTIVIZED RETIREMENT PROGRAM ORIENTATIONS – ACT 80-2020**

On November 16, 2020, the SIFC Administrator, Mr. Juan C. Benitez Chacon, circulated a letter regarding the Elective Participation Forms for participating in the Incentivized Retirement Program – Act 80-2020. In this letter, among other matters, he included a list of employees of the Corporation's dependencies to receive, file, and confirm receipt of the Selection Forms that employees submit.

This Act also requires government entities to orient eligible staff and present a Retirement Plan for these purposes.

Please be advised that the Corporation is preparing the required orientations, so that the employees may have all of the information and elements necessary to determine whether to join the Incentivized Retirement Program benefits or not. Although the letter is being circulated by various means, including email, print, and others, these orientations, **the Elective Participation Forms (Official Application) will not be received as indicated in the November 16, 2020 memorandum, nor by email.** The exact date when we will begin accepting same will be announced.

We will be in constant contact with the employees in order to keep them informed as to everything regarding this program.

This letter does not constitute a final approval of said Incentivized Retirement Program.

/rbv.



PO Box 365028 San Juan, PR 00936-5028 Tel. (787) 793-5959

Rev. E. Melinda Siqueira
P.O. Box 361
Canovas, PR 00739



7021 0350 0001 2016 1104

RETURN RECEIPT
REQUESTED



1000



10185

U.S. POSTAGE PAID
EPA, INC.
CANOVAS, PR
00739
JUL 21 21
AMOUNT
\$8.25
R2305P150006-02

RECEIVED
JUL 07 2021
PRIME CLERK LLC

Prime Clerk LLC
Grand central station
P.O. Box 4850
New York, NY 10163-4850



T 718.384.8040
W TargemTranslations.com
E projects@targemtranslations.com
A 185 Clymer St. Brooklyn, NY 11211

TRANSLATOR'S CERTIFICATE OF TRANSLATION

Translation from: Spanish (Puerto Rico) into English (US)
TARGEM Translations Inc.

I, Andreea I. Boscor, ATA-certified Spanish-English #525556, acting as translator at TARGEM Translations Inc., a NEW YORK City corporation, with its principal office at 185 Clymer Street, Brooklyn, NY, 11211, USA, certify that:

the English translated document is a true and accurate translation of the original Spanish and has been translated to the best of my knowledge.

Original Document Name: **Claim No. 27339**

Signed this 11th day of August 2021



Verify at www.atanet.org/verify

A handwritten signature in blue ink, appearing to read "Andreea I. Boscor".

Andreea I. Boscor

